

AP ✓

| | | | |
|---|----------------------|------------------------|--------------------|
| O I P E TRANSMITTAL FORM AUG 07 2006 (to be used for correspondence after initial filing) PATENT & TRADEMARK OFFICE | Application Number | 09/933,316 | |
| | Filing Date | August 20, 2001 | |
| | First Named Inventor | Stephen C. PORTER | |
| | Art Unit | 1617 | |
| | Examiner Name | Y. CHONG | |
| Total Number of Pages in This Submission | 5 | Attorney Docket Number | 8600-0029 (01-185) |

| ENCLOSURES (Check all that apply) | | |
|--|--|---|
| <input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request (1 page) <i>in duplicate</i> <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Notice of Appeal (1 page) <i>in duplicate</i> ; Check in the amount of \$950.00; Return Receipt Postcard |
| Remarks: The Commissioner is authorized to charge any additional fees to Deposit Account 18-1648. | | |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | | | |
|--|---------------------------|----------|--------|
| Firm Name | Robins & Pasternak LLP | | |
| Signature | <i>Dahna S. Pasternak</i> | | |
| Printed name | Dahna S. Pasternak | | |
| Date | August 2, 2006 | Reg. No. | 41,411 |

| CERTIFICATE OF TRANSMISSION/MAILING | | | |
|---|------------------------|------|----------------|
| I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below. | | | |
| Signature | <i>Michelle Hobson</i> | | |
| Typed or printed name | Michelle Hobson | Date | August 2, 2006 |